## NONPROVISIONAL PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF & BERRIDGE, PLC P.O. Box 19928 Alexandria, Virginia 22320 Telephone: (703) 836-6400 Facsimile: (703) 836-2787		Attorney Docket No.: 117464						
		Date: October 30, 2003						
		MAIL STOP PATENT APPLICATION						
Customer Number:	stomer Number: 25944		NONPROVISIONAL APPLICATION TRANSMITT. RULE §1.53(b)					
Commissioner for Pater P.O. Box 1450 Alexandria, VA 22313								J.S. PTO 5872.
Sir:								169/
Transmitted herewith fo	or filing under 37 (	C.F.R. §1.53(b) is the r	onp	provisional pa	atent applica	tion		10
For (Title):	EGR-GAS FLOVENGINE	V RATE ESTIMATIO	N A	APPARATUS	FOR INTE	RNAL C	COMBUSTIC	N
By (Inventors):	Akio MATSUNA	AGA and Hidenobu N	٩K	AMURA				
Use Figure  A Declaration and This application (A Preliminary A This patent application)  This patent application of the execute An Information Entitlement to so A Preliminary A Priority of foreign A certified This application the invention discountry, or under the Invention of	for front pand Power of Attorn claims benefit of lamendment is attaction is assigned and Assignment is find Disclosure Statement all entity status is mendment is filed an application No. copy of the above is NOT to be publicated in this application and in the calculated below:	ney is filed herewith. Provisional Application ched to reflect this claim to TOYOTA JIDOSH iled herewith. It is filed herewith. It is thereby asserted. In herewith. It is hereby asserted. It is hereby asserted. It is herewith. It is herew	ven app	n the Specific ABUSHIKI  here 1, 2002  colication(s) is 2(b). The unit will not be	in <u>Japan</u> is c filed herew ndersigned a e the subjec lication at ei	claimed (ith. ttorney out of an i	O CORPOR.  35 U.S.C. §1 or agent heretapplication f	19).  by certifies that iled in another iling.
FOR:	NO. FILED	NO. EXTRA		RATE	FEE	<u>OR</u>	RATE	FEE
BASIC FEE					\$ 385	<u>OR</u>		\$ 770
TOTAL CLAIMS	4 - 20	= 0*		x 9=	\$	<u>OR</u>	x 18	\$
INDEP CLAIMS	1 - 3	= 0*		x 43 =	\$	<u>OR</u>	x 86	\$
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED				+ 145 =	\$	<u>OR</u>	+ 290	\$
* If the difference is Check No. 1478		ter "0". of \$ <u>770.00</u> to cover th	ne f	TOTAL	\$ tached. Exc	OR ent as otl	TOTAL	\$ 770

Check No. 147824 in the amount of \$770.00 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted

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